

**Notice of Management Change**  
Section 231, Sale and Supply of Alcohol Act 2012

Name of Licensed Premises: .....

Licensee: ..... Licence Number: .....

Address of Licensed Premises: .....

Contact Phone: (    )..... Contact Fax: (    ).....

**What are you notifying?** (Please tick and complete the applicable box below)

**New Certificate Holding Manager**

Full Name: ..... Effective from: ...../...../20.....

Certificate Number: ..... Certificate Expiry Date: .....

**Temporary Manager**

(see s.229, Sale and Supply of Alcohol Act) Effective from: ...../...../20..... to ...../...../20.....

Full Name: ..... Date of Birth: .....

Residential Address: .....

Who they are replacing: ..... Certificate Number: .....

Reason: .....

**Note that a temporary manager must apply for a manager's certificate within two working days of their appointment**

**Acting Manager**

(see s.230, Sale and Supply of Alcohol Act) Effective from: ...../...../20..... to ...../...../20.....

Full Name: ..... Date of Birth: .....

Residential Address: .....

Who they are replacing: ..... Certificate Number: .....

Reason: .....

**Termination / Cancellation of Manager Appointment**

Full Name: ..... Effective from: ...../...../20.....

Certificate Number: ..... Certificate Expiry Date: .....

**Forward a copy of this completed form, within two working days of the appointment (or termination), to:**

The Secretary  
Hastings District Licensing Committee  
C/- Hastings District Council  
Private Bag 9002  
Hastings 4156  
Fax (06) 871 5115

New Zealand Police  
PO Box 49  
Hastings 4156  
Attention: Liquor Licensing  
Fax (06) 878 0872

Signature of licensee: ..... Date: .....

Name: ..... Position (director, partner etc) .....